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APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/576,859	10/576.859 10/11/2006		Robert Plourde JR.		03678.	.0207.PCUS02	9127	
TITLE OF INVENTION: NON-NUCLEOTIDE COMPOSITIONS AND METHOD FOR TREATING PAIN								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE 1	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755	\$300	\$0	\$0 \$1055		05/24/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
LEWIS, PATRICK T		1623	514-045000					
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.363). (1) the names of up to 3 registered patent attorneys								
Change of correspond	dence address (or Cha	or seems OF alternatively						
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" Indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member n					
PTO/SB/47; Rev 03-02 Number is required.	or more recent) attach	registered attorney or agent) and the names of up to 2 registered plactn attorneys or agents. If no name is 3 listed, no name will be printed.						
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT n substitute for filling an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Inspire Pharmaceuticals, Inc. Durham,					, North Carolina			
Please check the appropriate assignee category or categories (will not be printed on the patent): 🚨 Individual 🚨 Corporation or other private group entity 🚨 Government								
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								
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						1,131		
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